

The Magazine for Multiples Since 1984

# TWINS™

30th Anniversary

7 WAYS TO AVOID  
PARENTING  
BURNOUT

[www.TwinsMagazine.com](http://www.TwinsMagazine.com)  
September/October 2014

What to do  
when One  
Twin is Sick!

Unique is  
**BETTER**  
than Equal

Cut the  
Chaos  
Adopt a Color  
Coding System!

**YES!**  
They Can  
Learn to Care



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## On the Cover:



Meet this issue's cover twins Riley Paige & Payton Cheyenne. They are fraternal twins, age three from Lavaca, Arkansas. Their proud parents Kendall & Tosha say the girls have such big hearts! They both love to read, ride their bikes, swing and go to the park. They want all their family members together all the time. They tell each other along with everyone they come in contact with that they are best friends! Mom Tosha adds, "Everyone who sees them tells me how their smiles are like rays of sunshine." Cover Photography taken by: Valerie Berry, Photography by V [www.facebook.com/Photography by V](http://www.facebook.com/Photography by V)



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We proudly represented our magazine at the 8th annual Niche Publishing Conference in Minneapolis, MN earlier this month. We are a small business, like most of the attendees, but I was extremely proud of our footprint in this arena.

All the attendees were there to discuss how to better serve their audiences including:

1. **Advertisers** - companies that help support the magazines with their ad dollars
2. **Content Contributors** - folks who write content for the readers
3. **Strategic Partners** - companies that help with things like APPS, distribution, hosting, email, etc.
4. **Employees** - staff people that work for the magazines
5. And finally - **THE READERS**

All of the publishers had a social media presence like we do on Facebook, Twitter, Pinterest and others. Publishers had the full gamut of platforms for their audiences that include *printed magazines, digital magazines, blogs, e-books, e-newsletters, seminars, events and conferences*. What were once only printed magazines has evolved into a plethora of vehicles to match the current information landscape.

There are still many wonderful printed magazines but the overall trend is still decreasing in favor of the alternatives noted above. *We made the move to digital in 2010 which put us ahead of the curve but we could greatly improve* in some of the other areas. As the publisher, I am convinced that we could broaden our whole business model and do a better job of providing content and service.

I spoke with many other publishers who had similar outlooks, desires and growing pains. The peers there were all business owners and team members that were trying to improve their offerings, provide service with challenging budgets and further establish their entities. Most of us had similar concerns about how to best *generate a fair revenue stream, pay their staff the best salaries they can and balance the whole equation with great reader content and sponsor support*.

So, I return to our HQ with many ideas to implement. Having visited with my compatriots in the publishing world, I am enthused about our passionate niche - the world of Twins! I felt most connected with publishers that were lucky enough to pair their business with a life passion as we have like Outdoors enthusiasts with publications about the outdoors and hobbyists with editions about their hobbies (to name a couple.) As our twins enter the second grade, we have embraced their evolving personalities, life experiences and challenges and look forward to guiding our publication toward the future.



**Publishers Bill & Gina Cody & Kids**

Respectfully,

Bill Cody,  
 Publisher

## Twins and Former Young & the Restless Alums Releases Self-Titled Debut EP!

As a follow-up to the wildly successful release of their anti-bullying anthem, "Let Your Light Shine," Bianca & Chiara D'Ambrosio released their self-titled debut EP on September 23rd (Blue Eyed Club Records). Produced by Andrew Lane, the EP features a track-list that showcases the twins' vocal talents, including the first single, "Package Deal" that dropped on September 16th and landed at #2 on the "Most Added" single charts for AC radio stations around the country for the past two weeks.

You can check out Bianca & Chiara D'Ambrosio's videos at: YouTube: <https://www.youtube.com/watch?v=gwlc9hiYtG8>

"Let Your Light Shine": <https://www.youtube.com/watch?v=gwlc9hiYtG8>



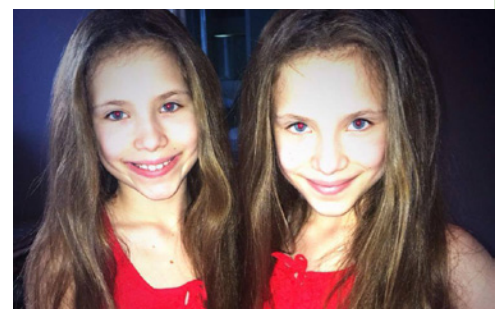
Born just two minutes before her twin sister, Bianca often assumes the role of the "big sister," and loves to take charge. Her sense of responsibility

and quick-wittedness make Bianca mature for her young age. After working closely with a female director on a recent project, Bianca has found her calling, and one day dreams of being behind the camera, as a director herself. The younger of the twins, Chiara, is much more of a jokester and a free-spirit. She loves to channel her innate creativity into fashion and styling outfits for her and her sister.

Hailing from Santa Monica, Calif., twins Bianca and Chiara D'Ambrosio broke into show business at 2-and-half-years-old, and haven't looked back since. Since beginning their acting career as the on-screen daughter to Michelle Stafford and Joshua Morrow on the long running CBS daytime drama series, "The Young and the Restless", Bianca and Chiara have acquired an impressive resumé of credits—making guest appearances on shows such as "The Closer" (TNT), "Parks and Recreation" (NBC), "Close to Home" (CBS), "See Dad Run" (Nick at Night), "Jeselnik Offensive" (Comedy Central), and "Legit" (FX), among others. Keeping busy, Bianca and Chiara also appeared on the NBC pilot entitled "Guys With Kids", starring opposite Sara Rue and Jamie-Lynn Sigler, and have shot numerous commercials and ads for companies such as Subaru, Toms Shoes, and Glittertainment.

This Summer, Bianca and Chiara D'Ambrosio made their big-screen debut with the release of the award-winning indie film, "Feeding Mr. Baldwin" directed by Will Prescott. You can view the Feeding Mr. Baldwin trailer here: [\[mand/feedingmrbaldwin/90074039\]\(http://vimeo.com/onde-mand/feedingmrbaldwin/90074039\)](http://vimeo.com/onde-</a></p>
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In late 2012, inspired by their own bullying experiences, the twins released their debut single, "Let Your Light Shine" which quickly became an anthem for anti-bullying efforts worldwide. The accompanying music video -- which co-starred a few of their celebrity friends -- went viral and generated nearly 1.5 million views in 72 hours. The music video was an Official Selection at top film festivals worldwide garnering "Best Music Video" honors from several juries. Young Hollywood rallied around the pint-sized pair by posting pics of themselves wearing the twins' "Let Your Light Shine" t-shirts, including: Kristin Cavalleri and Aly & AJ, among others. Bianca and Chiara's efforts were recognized at the prestigious 2013 Gracie Awards in NYC where they became the youngest recipients to be honored in the history of the Awards. Learn more at: [www.dambrosiotwins.com](http://www.dambrosiotwins.com) or @dambrosiotwins



## Baby Product Safety Tips from San Diego Bebe® Eco-Nursing Pillow

San Diego, CA — There are many children's products that are not always as safe as they seem, and nursing pillows are one of those products. Mom of twins, Sandy Clark, invented the popular San Diego Bebe® Eco-Nursing Pillow for the comfort and discretion of moms. After doing her research, she learned so much about toxic chemicals found in baby products, and determined to make her pillow the healthiest nursing pillow on the market.

Children's products are made from plastics, foam or paint, all of which can contain very harmful chemicals. Here are five additives often found in juvenile products that should be avoided:

1. Phthalates – these hormone-disrupting chemicals are used to make plastics soft
2. PVC – toxic substances that can cause health and environmental problems
3. Lead – poison that was banned from the home but still can be found in products today
4. Triclosan – pesticide found in anti-bacterial soaps and hand sanitizer
5. Fire-retardant chemicals – linked to hormone disruption, cancer, and harming the development of the brain

A lot of these chemicals are hidden in commonly used household items, so parents don't even realize they should be checking labels on their purchase. Before you go out and buy any of these products for your family, make sure you research them first:

1. Toys – many are made of vinyl plastic and contain Phthalates

2. Pillows and Mattresses – flame-retardants are often added to nursing pillows, foam cushions, changing pads, mattresses and toys
3. Clothes – some wrinkle-free clothing and linens release formaldehyde, a cancer-causing chemical
4. Shampoo and Conditioner – tons of health and beauty products contain parabens, which can interfere with your body's endocrine system
5. Bottles and Sippy Cups – BPA has been used in hard plastics for years and can come into contact with food

Duke University published a research study exposing these toxic chemicals in over 100 baby products. You'll be surprised to see who's on the list: <http://watoxics.org/publications/list-of-products-tested>. Sandy Clark then sent her nursing pillow to Duke to be reviewed and received a reply from Duke University Chemical Scientist, Dr. Heather Stapleton. Stapleton, who is a mother herself, said, "The San Diego Bebe® Eco-Nursing Pillow is not only a very supportive pillow with amazing features for discreet nursing, but is also free of flame-retardant chemicals that have been shown to cause adverse health effects in animal studies. I applaud Double Blessings [Clark's company] for taking steps to produce high quality products that meet the same flammability standards without using these chemicals."

Clark says, "We all expect the products we buy for our babies to be safe. Health-conscious parents who are concerned about what their infants are exposed to now have a superior foam-free choice."

San Diego Bebe® Eco-Nursing Pillow is the healthiest and most innovative nursing pillow on the market. Made with virgin polyfiber Eco\*Loft™, a non-toxic and hypo-allergenic foam-alternative, it is void of harmful chemicals. It's also recyclable and eco-friendly. San Diego Bebe® is available in two versions, for nursing one baby or twins. The entire line is baby-safe, and is covered with deluxe plush fabrics including organic cotton.

San Diego Bebe® Eco-Nursing Pillows are available for purchase at [www.doubleblessings.com](http://www.doubleblessings.com).

## Two Sets of Twins Lead Colorado High School Cross Country Team!

([www.coloradoan.com](http://www.coloradoan.com))

Two sets of twins, juniors Rebekah and Rachel Rairdon and freshmen Leeann and Megan Wagner lead their high schools cross country team. "They're just a family; it's awesome to be a part of it," said fellow teammate Olivia Couch, who transferred to their school before the school year.

*Continued on page 31*

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by Joshua Coleman, Ph.D.



# 7 Ways to Avoid **PARENTING BURNOUT**

Feeling overwhelmed, overburdened, strung out, and stressed out—multiplied by two or three times? You're not alone.

Burnout occurs when our normal methods of coping become overwhelmed. It is a physical and psychological state that results from extreme stress and exhaustion. Parents of twins are more vulnerable to burnout because there is more to our physical and mental workload. More diapers, more nursing, more bottles, more laundry, more toys, more crying, more talking and more fights to settle. There is also quite a bit less with our dear twins and that can lead to burnout... less sleep, less money, less downtime, less quiet, less order and less predictability.

## **BURNED OUT BEFORE THE KIDS ARRIVE?**

A pregnancy with twins makes mothers more vulnerable to gestational diabetes, gestational hypertension, pre-term labor, Caesar-

ean section, increased nausea and exhaustion in the first trimester, increased chance of bed rest from week 20 on, hospitalization and prematurity. Thus, mothers of twins may begin their child rearing years burned out from the stresses of carrying a twin pregnancy.

Many parents of twins have suffered through years of infertility before they have children. While the birth of children is a relief from the sadness and trauma of infertility, it can also leave parents feeling guilty if they feel burdened and exhausted. As one mother said, "We spent so much money and time trying to have children and now I'm too burned out to even enjoy them. I feel ridiculous complaining or saying I need more help because I know we're lucky to even have kids."

Parents today are more vulnerable to burnout because they're much more anxious about being parents. In part, this is because they are better educated than any other generation on how

their behavior advances or inhibits their children's physical or emotional growth. In the past 30 years, there has been a cultural shift from an adult-centered household to a child-centered household. On the one hand, this has led to many positive changes in our society. We have an increased awareness that we can do a lot to increase the self-esteem and long-term well being of our children. There is a ready source of information on the causes of alcoholism, drug addiction, delinquency, learning and attention problems. The cultural shift towards recognizing the rights and needs of children have resulted in important policy changes, such as the laws against child abuse which were first enacted in 1964.

At the same time, the world has become a more dangerous place. The increase of drugs and guns makes raising children seem more fraught than it once was. As a result of the increased awareness about children's needs and the increased dangers, parents of today are much more anxious about being parents. In my work, I constantly hear parents express fears that their children will feel neglected or that a small mistake or misjudgment will have lasting consequences. There is enormous anxiety that their children will miss out on an opportunity that will place them at a social or educational disadvantage. These are conscientious, dedicated parents. Yet, this need to protect their kids from harm coupled with a desire to make them happy, increases their vulnerability to burnout.

This guilt and worry leads to burnout because it means parents aren't taking the kind of time for themselves or their marriages that would protect them from stress.

**PSYCHOLOGICAL SYMPTOMS:**

Burnout is characterized by feeling chronically overwhelmed and exhausted. It can also cause depression, anxiety, irritability and anger. In addition, burnout can lead to feelings of shame and isolation.

**PHYSICAL SIGNS:**

Burnout may cause decreased immune function; increased blood pressure; increased heart rate; insomnia; and appetite disturbance.

They believe they should give to their children, no matter how exhausted or needy they feel. And often we do have to give, no matter what. But we also have to know when it's OK not to give to our children and when to give to ourselves.

**7 WAYS TO AVOID PARENTING BURNOUT:**

**1** Manage your guilt. Strive to understand your beliefs about how you should parent. Do you have problems leaving your children with babysitters, taking naps when they're napping or finding time to nurture yourself and your marriage? Do you worry constantly that some ill will befall your children? If the answer is yes to any of these, you may be burdened with irrational guilt or irrational worry about your kids that could lead to burnout.

**2** Take down time (anyway). Beg, borrow or barter with your partner or friends, but make sure you get time to replenish yourself. Children benefit when parents take care of themselves. Even if your kids object through tears or complaints when you leave the house, they will nonetheless benefit from your taking time to recharge your batteries. Don't be so tuned in to their needs that you ignore your own.

**3** Make sure your down time isn't spent with errands or busy work. Try to make your down time special. In *The Artist's Way*, Julia Cameron suggests people take "Artist's Dates." This is where you do something that replenishes you creatively and spiritually.

**4** Manage your stress. A solid body of research now shows the benefits of exercise, yoga and meditation in combating stress. Most cities have community centers where you can learn how to meditate or do yoga. Even 20 minutes a day of exercise, meditation or yoga can make an important change in your mental outlook and well being.

**5** Take time with your partner. Your relationship can either be an ally against stress or a major contributor to it. Try to have one night or afternoon a week with just you and your partner to nurture your marriage. Don't lose sight of the

things you used to do before kids. Don't be such a dedicated parent that you become a neglectful wife or husband.

**6** Ask for what you need. Whether it's with friends, family or spouse, burnout happens fastest when we don't ask for what we need from those who can help us.

**7** Get help and support. Isolation can lead to depression, shame and anxiety. Stay in touch with the people you like and care about. Tell them what you're going through. Many parents (mothers in particular) feel embarrassed or ashamed if they feel overwhelmed by their children or resentful of them. This makes it harder to reach out for fear of being criticized or condemned. Try not to compare yourself to other parents who seem to be able to parent effortlessly and do a million other things. Strive to have as much help as you can to feel good. Parenting twins is hard enough; it is hardest when you don't get the help and support you completely deserve. ♥

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*Joshua Coleman, Ph.D., is a psychologist in private practice in Oakland and San Francisco, California. He is the father of twin sons and a daughter. Visit his website at: <http://www.drjoshuacoleman.com>.*

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# The



# of Raising Twins

by Kelli H. Clevenger

Twins are a wonderful gift that can test your sanity. I awoke one morning to flour covered walls, floors, furniture, and twins who looked like ghosts. Cooking breakfast was their lovely gesture that turned into a four-day cleaning spree. I learned not to put a new bag of flour within reach of three-year old twins. I also realized I had better develop a sense of humor. Quickly. And buy a vacuum cleaner.

Unfortunately, life doesn't come with a free handbook when you have twins. When mine were born 30 years ago, I wish they had. I developed an A-Z list of topics to help avert the insanity train. Grin and remember: All moms are unique, but motherhood is not unique to all moms. In other words, we're all in the same boat; we may just captain it differently. Here's to preserving your ship and your sanity:

**Advil:** You'll need a lot of it. Keep it in your purse, the car, and your medicine cabinet. Now might be a good time to buy stock in the company.

**Bribing and begging:** You'll need to brush up on these skills. You'll use it regularly when you want them to eat, brush their teeth, get dressed, get on the bus, get in the car, go to school and what-

ever else you can think of. By the time the kids are 16, you'll be able to write a book on this topic.

**Clutter:** Just pretend it's the new trend this year and featured in all the popular magazines. If you're lucky, you might get an offer to appear on that hoarding show.

**Doris Day:** Nobody always looks that perfect, so don't even try. Was it Ann Landers who said that clean hair is better than a new dress? There's the proof. Take a shower, and you're good to go.

**Elephant:** Sometimes it's best to ignore that big one in the room. Dwell on the positives, not the negatives. Elephants cost a fortune to feed.

**Forgiveness:** Forgive yourself when you make mistakes. While you're at it, you had better forgive your mom, your husband, the kid who called you fat in sixth grade...etc. Maybe you should make a list.



**Graze:** Yes, like a horse. It will be years before you can sit down for three squares a day. This suits me fine since I have often been called a horse's behind.

**Hair:** LOL. Just be thankful you still have some. Invest in some cute ponytail holders or a cute hat. It'll be years before you need curlers again. Maybe you can bring back that fresh-out-of-bed look.

**Illegal:** I think it's illegal to lock your kids in a closet. Better find another way to take a shower. The outside hose works well for rinsing out shampoo.

**Jeans:** This will be your go-to piece of clothing. In fact, I have an array of sizes in my bureau; just depends on the kind of year I'm having.

**Kill:** What you might want to do next time your husband comes near you. Try not to let the children hear the expletives when you tell him to go take a cold shower.

**Laughter:** In case you don't know, this is the best beauty secret out there! Remember that when you only have time to use Chap Stick. Thank goodness, Chap Stick comes in different tints.

**Make-up:** I wouldn't even buy any. I don't think the expiration dates last for 16 years when you finally get time to put some on.

**"No":** The word that will become the most used word in your vocabulary. Learn how to use it properly so you aren't arrested.

**Order in:** That collection of take-out menus will come in handy. Martha Stewart is overrated anyway. How many kids would pick a stuffed, whole red snapper over a McDonald's Happy Meal? I don't know many adults who would either.

**Pamper:** Yes, you. If mom is happy, everyone else will be too. Remind your spouse of this at all times.

**Questions:** You'll feel like a bobble-head answering so many questions. This is normal.

**Ragamuffins:** What the twins might look like at the end of the day. It's okay. Nothing a good bath won't fix...

**Sex:** Isn't that what caused this in the first place? Now, we're back to the cold shower thing.

**Treaty:** You'll get good at these when you need a cease-fire between the kids. Bribery works well too.

**Ugly:** All moms are beautiful! Wipe it from your vocabulary (unless you're talking about that set of neon tracksuits in your closet) or those leg warmers.

**Vacation:** You may need a vacation, or two or three. Just be careful if you're taking your husband. After all, vacationing together might be what caused the twins in the first place!

**Whine/Wine:** When there's too much whine, you may need a little wine. Don't go overboard. Your kids know how powerful

YouTube is. You should never have taught them to use that video camera on your cell phone.

**X-rated:** The twins will think those words are funny. You won't be laughing when they use them in public. Or around your mom or the preacher.

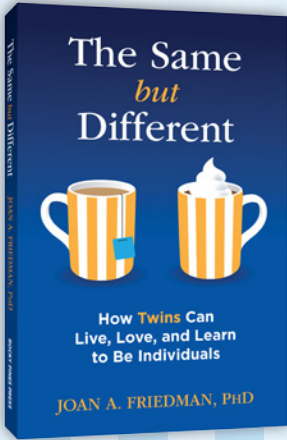
**Yank:** This is what you might want to do to your hair on certain days. Dolly Parton and Raquel Welch both make gorgeous wigs you can order right off the Internet. They actually look better than my real hair.

**Zip-Code:** You'll feel like you need one of your own when you're pregnant with twins. It's okay; it's the only time in your life when you can eat for three. Enjoy!

Raising twins is a challenge, but the most rewarding job you will ever have. Laughter may keep you sane. When you get discouraged, just remember what J.D. Salinger wrote in *The Catcher in the Rye*: "Mothers are all slightly insane." That sure makes me feel better. ♥

## DEALING WITH THE CHALLENGES OF BEING

# A TWIN?



**The Same  
*but*  
Different**

How Twins Can  
Live, Love, and Learn  
to Be Individuals

JOAN A. FRIEDMAN, PhD

**"The Same but Different** presents a stunning, in-depth look at the lives of adult twins as they face the twin challenges of closeness and independence, love and resentment in their evolving relations with each other."

—Nancy L. Segal, PhD, author of *Born Together—Reared Apart*

"Not only is **The Same but Different** a must-read for adult twins, it is an invaluable resource for the parents of younger twins who want to start their same-age children on the road to a healthy relationship in the future."

—Lauren Apfel, PhD, blogger "Omnimom"

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PREGNANCY



**Ruby Coats Mosher, D.V.M.** is from Emporia Kansas, is a veterinarian and the mother of fraternal twin girls.

*by Ruby Coats Mosher*

"I never worried about going through labor," said Sally, mother of 4-year-old fraternal twin boys, Aaron and Michael. "My doctor planned to deliver my twins by Caesarean section (C-section) at 37 weeks, so I didn't even attend the labor section of our prenatal classes."

Then, due to complications at 36 weeks gestation, Sally was transferred to a regional medical center 100 miles away, where her new doctors planned a vaginal delivery. After induction, Sally labored for six hours. But as she was ready to begin push-

ing Baby A out, the external fetal monitor showed that Baby B was experiencing a life-threatening decrease in heart rate. "So after all that labor," Sally said, "I had a C-section after all!"

While Sally's experience was certainly not the usual for women expecting multiples, neither was it that unusual. Just as there is no "average" multiple pregnancy, there is no average labor experience either. Labors with twins may take unplanned turns, or may go as smoothly as clockwork. There are many factors which may affect the course of an individual

woman's labor, such as the number of babies she is carrying, gestational age, fetal presentation, maternal or fetal medical conditions, experience and expertise of the attending obstetrician, and availability of fetal monitoring technology, anesthesia, and neonatal care.

Ideally, the decision concerning the route of delivery—whether through the birth canal or by C-section—which determines whether or not a woman will go through labor, should be made before labor begins or in the early stages of labor. Generally, unless there are mitigating circumstances, uncomplicated twin pregnancies near term (about 37 weeks), are allowed to spontaneously progress into labor and vaginal delivery.

The most likely candidate for vaginal delivery are the 40 percent or so of twin pregnancies in which both babies present head first. Some obstetricians will also attempt vaginal delivery with other combinations of vertex and breech, but others may be inexperienced with such a delivery and/or unwilling to risk the difficulties which may be encountered in those situations.

But some women know well in advance of the onset of labor pains that they will have a Caesarean and not go through labor. Early indications for C-sections may include pregnancies of three or more fetuses, fetal growth retardation, monoamniotic placentation (both babies in the same sac), placenta previa, and maternal diseases such as hypertension, diabetes mellitus or herpes.

In addition, for a variety of reasons, some doctors routinely schedule all multiple pregnancies for planned C-sections. If this is the case with your doctor, ask him or her to fully explain their reasons for this decision in your particular situation.

Because a couple's desire for a certain type of labor and delivery experience needs to be considered, prospective parents of twins should discuss their wishes with their obstetrician well in advance of labor so accommodations can be arranged. Sometimes, a change of doctor or hospital may be necessary. For instance, couples who wish a vaginal delivery may need to be

referred to another obstetrician if their current doctor prefers to perform C-sections for even uncomplicated twin births.

## DON'T WORRY—BE HAPPY

Bonica, mother of 5-year-old Mandy and 2-year-old Jesse and Jessica, was petrified at the thought of laboring to deliver her boy/girl twins. "I remembered my labor with Mandy," Bonica says. "I was afraid labor with twins would be twice as long and twice as hard."

Although it is true that there is the potential for complications, a woman's labor experience with twins is generally similar to that with a singleton. As it turned out with Bonica, labor can actually be easier and faster, especially if a woman has already delivered one or more previous babies. Usually, the length of labor with twins is about the same as with a singleton. However, in some cases, the second stage of labor can be prolonged between the births of Baby A and Baby B.

Just as for singletons, a multiple labor is divided into three main stages. During the first stage, uterine contractions become progressively stronger and closer together, causing the cervix to prepare or ripen for delivery. Typical cervical changes include dilation (opening), effacement (thinning and shortening), and softening.

When labor must be induced, the obstetrician is concerned about readying the cervix for delivery as well as initiating uterine contractions. In most multiple pregnancies, however, the cervical status is favorable in the late stages. It is not unusual for a woman's cervix to be partially dilated before the onset of labor when she is carrying multiples, especially if she has previously given birth. And generally, the uterus containing multiples is easy to stimulate. Indeed, many women will have been taking to colytics to hold them back from labor.

When the cervix nears full dilation and labor becomes active, the contractions become more intense as Baby A prepares to be born. In most cases, both babies share the same first stage because the cervix needs to dilate only once for both babies to be delivered. Each baby will, however, have


its own second stage in which he makes the journey through the birth canal. Many obstetricians prefer to deliver Baby B within 30 minutes of Baby A, but unless fetal distress or other complications occur, there is an increasing tendency to consider longer intervals when safe and, perhaps, warranted. Complications after the vaginal birth of Baby A which may precipitate a C-section delivery of Baby B include cord prolapsed, placental abruption, and an abnormal fetal presentation which cannot be remedied.

Stage three is marked by the delivery of the placenta or placentas, usually after the birth of both babies. Occasionally, the first placenta is delivered before the second twin. In either case, there may be only one placenta, or there may be multiple placentas, which may be separate or fused. Close examination of the placental membranes can reveal some, but not conclusive, information about the Zygosity of the multiples.

## THE IMPORTANCE OF MONITORING

Fetal monitoring can also be credited with saving the lives of compromised fetuses. Electronic monitoring should include both twins during labor and delivery. Fetal monitors register the babies' heart rates and can detect fetal distress as evidenced by bradycardia or slowed heart rate. Although the fetal heart rate may normally slow down at various times, obstetricians are concerned with what are called variable and late decelerations. Variable decelerations may result from compression of the baby's umbilical cord. Late decelerations begin at the peak of the contraction and last beyond the end of it. These bradycardias occur due to insufficient oxygen supply from the placenta.

Sally credits fetal monitoring and an emergency C-section with saving the life of her Baby B: "Without the monitor telling us that Aaron was having trouble," she said, "we might not have him today."

"There is no way," she added, pulling her boys close, "I could be dissatisfied with the way my labor and delivery went—just look what I got out of it!" 



# The Ties That Bond



by Cheryle G. Levitt, R.N., M.S.N.

## UNDERSTANDING INFANT ATTACHMENT & BONDING

**Cheryle G. Levitt, R.N., M.S.N.**, is a pediatric nurse in Pittsburgh, Pennsylvania and the mother of four children, including fraternal twins.

Every expectant mother can attest to the fact that parenting begins in the prenatal period. They are advised to protect and nurture their unborn child or children by modifying their activities during pregnancy, watching their health and seeking prenatal care. Under normal circumstances, during the months before babies are born, some measure of emotional

ties to the unborn children also beginning to develop. These feelings tend to increase as the pregnancy progresses, and the babies move and become more of a reality.

“Attachment” and “bonding” are the usual names used for those activities and feelings that connect parents emotionally to their children both before and after birth. Common buzz

words of parenting-phrases such as “mother-infant bonding” and “prenatal attachment” have been popular for the last several decades.

The “how-to” baby books over the last several decades have proliferated with suggestions on how to facilitate early bonding between mothers and babies; these were accompanied by subtle and, in some cases, not-so-subtle warnings of the potential consequences to the future maternal-infant relationship if early contact did not occur. As a result, positive changes occurred as nurseries in hospitals instituted rooming-in policies on post-partum units and whisking the baby away for weight and measurements immediately after birth were discontinued; and breastfeeding soon after delivery became the common practice.

In addition, childbirth education curricula included information on bonding; birthing rooms became quite popular; and home deliveries took on new significance. The latter developments strived to enhance maternal-infant bonding as well as de-sterilize the birthing process, and have helped to improve and demystify the whole labor and delivery experience. Research found that the first minutes and hours after birth were crucial to the formation of a healthy bond. The down side of these early conclusions from bonding and attachment studies was their all-or-nothing nature; it caused many parents who did not, for whatever reason, have early contact with their infants to be suffused with feelings of worry and guilt over the status of their future relationship with their newborns. The research findings and predictions limited choices of individual families and imposed activities that may have been inappropriate; plus it made few allowances for infants whose births were unusual, whether due to prematurity, distress, multiple gestations, etc.

Also the terms “bonding” and “attachment” were often used interchangeable, causing confusion among parents and health professionals, and leading to possible labeling, incomplete or inaccurate judgments. As the message spread, parents who had been separated from their children at birth and had ultimately developed positive relationships questioned both their own practices and the research. What, exactly, are bonding and attachment? Are they different? Is it crucial to have early contact? What happens to the many parents whose infants are whisked to neonatal intensive care units (NICU) immediately after birth? Are these parental relationships doomed from the start?

## UNDERSTANDING ATTACHMENT

There is a distinction to be made between the immediate contact between a parent and child at birth and the continuing process of developing affectionate ties over time. The current belief is that “attachment” is a process, an affectionate tie formed between two individuals that endures and

progresses over time. It develops during infancy, but then continues to evolve. Attachment is divided into three areas: acquaintance, bonding and attachment.

1. **Acquaintance** is the act of becoming familiar with someone through some means of communication—touch, vision, speech. This stage differentiates for parents of the fantasized ideal they’ve held throughout pregnancy from the actual little individuals they’ve created.
2. **Bonding** refers to the immediate connection made at birth through the initial few hours after birth; it is the physical/visual contact between mother and baby. It is but one step, albeit, an important one, of the total attachment process. Bonding refers to time-limited mutual experiences in parent-infant relationships, and the concept persists that parents’ encounters during these few hours can have lasting effects on subsequent parental behavior. Hospitals encourage mothers to see and touch their infants even if they are being transported for care to another unit.
3. The last phase, actual **attachment**, is a long process, but can develop normally over time with support in an NICU setting. Parents must make a commitment to come, assist with feedings and care, when appropriate, and change some other priorities in their lives to allow for frequent visitation. Mothers can pump breast milk to save for when the babies can tolerate it, decorate the bedside, and hold the babies when stable for hours and visit regularly. Asking NICU personnel in advance about the baby’s schedule helps parents plan their visits and allows the NICU staff to organize their care to allow for more free time with the parents.

## WHEN BONDING IS INTERRUPTED...

When parents are separated from their infants at birth, normal bonding processes are interrupted. Priorities are altered and the entire focus of the birth experience is shifted to the babies’ survival, progress and adjustment

to the neonatal intensive care unit (NICU). Parents need help in accessing information, understanding the complex health care system into which they have been thrust.

The NICU personnel have the unique role of helping parents cope as well as possible; the optimal method in the initial days is through communication. Unfortunately, parents’ information needs are at their greatest during the early days, but their strength and ability to seek information are at their lowest. During the difficult early days, parents need:

- Explanation and clarification of the need for the babies to be transported to another facility for treatment;
- To name their babies;
- Pictures and/or videos of their babies;
- Factual, up-to-date information about their children’s conditions, provided in laymen’s terms;
- Names, titles and phone numbers of personnel they can contact with questions and concerns. The NICU has a team comprised of neonatologists, surgeons, nurses, social workers, therapists, and others directly concerned with babies’ care;
- Suggestions parents can use to enhance their contact with and care for their babies;
- An explanation of pertinent equipment in simple terms, focusing on the role the technology plays in the treatment of their babies;
- Comments about the babies that individualize them for their parents, such as “I notice that he curls his fingers while he sleeps,” or, “He seems to become calm when I stroke his cheek”;
- To be called sometimes by the primary nurse instead of always doing the calling. Communication does not have to be initiated by NICU staff only in times of crisis; a call to reassure and report the past few hours can be a great uplift to a grieving mother;
- Ample time for questions and reiteration of the facts;
- Informational videos about the NICU to help allay fears about the babies’ first home. ♥



TODDLERS

# When One Twin is Sick

## TIPS FOR PARENTS!

by Janet Gonzalez-Mena

**Janet Gonzalez-Mena** lives in Napa, California and teaches early childhood education at Napa Valley College. She is the mother of five children and co-authored a book, "Toddlers and Caregivers".

"He has to be exposed to germs sometime," the doctor told me when I complained about how often my toddler son, Tim, got sick. Tim was a premie, born 13 weeks early. He spent there and a half months in the intensive care nursery. I wanted him to enjoy a little rest and relaxation after his difficult start, however, so in order to protect him from various and sundry childhood illnesses for a while, I proposed to isolate him from other children.



The pediatrician, however, disagreed. "If he doesn't get around other kids now, then he'll just get all these illnesses when he finally does. You can put it off until Kindergarten, but it's inevitable that he'll get sick sometime."

This is just one of the issues that parents of premature infants, whether they are singletons or multiples, sometimes face. Protecting their children from germs can become an obsession with some parents. How to handle illness when it strikes is another issue—one that doesn't just concern parents of preemies.

## MULTIPLE SICK BEDS

I hated for my children to be sick, especially when they were toddlers. "Nothing is worse than a sick toddler," I told a group of parents of twins, "unless it's two or three of them." "Wrong!" they informed me. In fact, when illness strikes, it can often be harder on parents of singletons than parents of multiples. Of course, it's never fun having a sick child, but the ill singleton is alone and often feels isolated. Multiples have each other for company. A playmate to share misery can lessen it a bit, and a healthy twin can be encouraged to help out and even entertain a sick co-twin. Even a toddler can bring a wet washcloth for a feverish forehead.

Not that all parents of multiples keep their children together when sick. In many families, a good deal of effort goes into trying to iso-

late the sick child for fear of contagion. But most parents eventually give up trying to keep twins separated, because they usually end up getting the same diseases anyway. Most germs are sneaky and spread before symptoms appear, so that by the time one child becomes sick, his co-twin has usually already been exposed. Meeting the needs of both a sick and a healthy toddler at the same time can be difficult. Parents who don't have help automatically offered to them should ask for it, enlisting grandparents, neighbors and friends if possible.

## THE GREEN-EYED MONSTER

Jealousy can be a factor if one child is sick and his co-twin is well. It's only natural for parents to pay extra attention to the child who is sick, but it's important to be aware of the well child's feelings. Giving them each individual time with you (whenever possible) will help prevent repressed anger and anxiety being acted out in obnoxious behavior, or fake injuries and illnesses.

When I was a child, I was always put to bed when sick. It was just assumed that bedrest was called for in every situation. As

a parent, I've learned that keeping toddlers in bed is harder than letting them move around and engage in quiet activities. Of course, it depends on how sick they are, but I go by how the sick child feels and if he wants to play. If I observe that they feel well enough to do so, I let my children play, but make sure they get plenty of rest and don't elevate their temperatures. Letting sick children experience extreme temperatures can be hard on their bodies, so I tend to keep them inside the house. ♡



## BABYING BOTH BABIES

Here are some tips for making things easier when one or both of your toddler twins are sick:

- **Take what sanitary measures you can, such as separate cups and washcloths, but don't go overboard.** Exposure probably occurred before the symptoms appeared. Some childcare centers have discovered that it doesn't really help their illness rate at all to isolate sick children.
- **Keep life as calm and as ordinary as possible, but lighten up on expectations.** You might have to temporarily suspend some of your rules or requirements for behavior.
- **Avoid making too big a fuss over an illness.** When children discover that being sick makes them special, they learn to fake stomach aches and other maladies. Helping each of your children feel "special" should be a daily goal, not something that's only associated with illness or injury.
- **Watch out for overprotective tendencies.** It's okay to "baby" a sick child, but keep it within reason. And be sure to stop the "babying" when the illness passes. It's easy to worry about a child who is sick a great deal, or seems weak in some way. But the way to strengthen children is to provide them with what they need, rather than limit them or smother them. There's a fine line between caring for delicate children and overprotecting them.
- **Take care of yourself.** It's easy to neglect your own health when your children are extra-needy. You and your children will pay for that neglect in the end. If possible, ask friends, relatives and neighbors to help out.



# Yes!

## They Can Learn to Care

**Patricia Edmister, Ph.D.** was the director of developmental psychology and children's study at the California Family Study Center in the mid-1990's. She is also a mother of fraternal twins.

by Patricia Edmister, Ph.D.

When Tammy's mother got home, collapsed on the couch and said, "I just need a few minutes to unwind and put my feet up." 3-year-old Tammy ran to get her mother's slippers out of the closet and brought them, along with her teddy bear, out to her mom, saying, "These will make you feel better!"

When 3 ½-year-old Donald was playing with his truck in the sandbox with his twin brother David and the wheels came off, causing Donald to cry, David offered Donald his truck to help move the sand, saying, "Don't be sad—this will work, and maybe mom can fix the wheels."

Sometimes adults are surprised when children this young or even younger display such empathic behavior toward other children or adults. Research at the National Institute of Mental Health and at various universities, has shown, however, that babies as young as 12 months often demonstrate extremely compassionate, generous behavior. Their parents' example—

behaving in an empathic, caring way—was found to be the greatest influence on the children's behaviors.

### HOW EMPATHIC BEHAVIOR DEVELOPS

Empathy with others seems to be conveyed to young children through their parents' acts, rather than through their words, although words combined with actions become increasingly important as the youngsters get older. For example, when a parent explains how another person feels when that person is sad or hurt or tired, the child is better able to understand how his actions can help the other feel better.

Another major contributor to a youngster's developing empathy is the opportunity to form significant attachments to other young children. Edward Mueller's research at Boston University showed that toddlers who have frequent opportunities to play with the same toddlers develop strong emotional



connections with each other. Deborah Vandell, a psychologist at the University of Wisconsin, found that preschoolers who have an opportunity to be with each other on a regular basis feel safe, focus on each other and develop true friendships. These friendships tended to bring out each other's empathy, affection and generosity.

Being a twin increases the potential for the early development of empathic behavior, since the children have a "built-in" friend of the same age with whom a relationship can be established and behavior practiced and rewarded. In addition, the children potentially are exposed to a greater amount of positive parental modeling of empathic behavior (with the same-age sibling). Since more opportunities will arise due to the presence of the additional same-age child. This, then, provides additional positive reinforcement of empathic skill demonstration.

Same-age "peers" or siblings in this case, often play an important role in moving each other to the next developmental step. The child who is slightly more advanced in terms of empathy and compassion provides a model for the less advanced child, which that child then sees reinforced.

Parents do not need to be aware, though, that this is not always true when two children are very different temperamentally. In some cases, a special quality seems to develop between two children; in other cases it doesn't. Also, different children have different personalities and personal styles, and react to parental modeling and reinforcement in different degrees.

Finally, the fact that a child demonstrates empathic behavior some of the time does not mean you can expect it all the time. When a child is just moving into this stage, when he or she is tired or having a bad day, or when the child lives in an environment where empathic behavior has not been modeled or nurtured, he is much less likely to demonstrate empathy. So, if your child does not show empathy on a given day, be understanding, sympathetic and nurturing, and move on to the next day when he or she is refreshed and more emotionally available. ♥

## 7 Steps to Teaching Empathy

1. Demonstrate/model affection and caring for your children. Children will pattern their behavior after that demonstrated by parents—parent-to-parent and parent-to-child.
2. Don't "hold-back" on showing affection and empathy with either boys or girls. Be as empathic with boys as you are with girls.
3. Compliment your children when they display empathic behavior—when they give help to a child who's crying because he's fallen or pat a child on the back when she's sad because a toy broke, for often children display empathy through behavior, not words.
4. Read stories to your children that have empathic behavior in the text; discuss real-life situations involving empathic behavior, such as hurricane relief aid to New Orleans. Involve your children when you send donations to charitable organizations.
5. Model empathy toward others and involve your child as a participant and observer by helping out in community center, church or nursery school. When someone does something nice for you, tell your children how that kind behavior makes you feel.
6. Comment on people you look up to in terms of why you respect them; identify people who exemplify empathy and explain to your children why they behave as they do and how good that makes the recipients feels.
7. Monitor your child's television viewing. Research has shown that children who watch empathic behavior on TV behave more empathically, showing, caring, sharing, comforting, and helping behaviors toward others.

## Stages of Empathy

Children go through various stages before demonstrating empathy. First, they only think of themselves; thinking of doing something for someone else does not occur to them. Next, they may do a "good" deed that will benefit someone else, but the child expects to be rewarded for it, too. At the next stage, the child understands that it is important to do things for others and that it doesn't matter whether or not he or she is rewarded. The child really understands how the other person feels if he fell down and hurt himself, or if he lost a toy and the person who found it kept it.

## Can Children be too empathic?

Yes! Some children who seem to always want to make the other person happy—even at their own expense—may be acting out of anxiety. The fear seems to be that if they aren't always helping others, they might be seen as selfish. They then worry that this would bring a parent's wrath, or the wrath of others, down upon them.

This type of behavior is often seen in children whose parents fight a lot, or who are going through a divorce. The children think that by being perfect angels, they can "make things better" for the parents. Occasionally, in fact, children in these situations become the nurturers of their parents, thereby reversing the natural parent-child roles.

Sometimes children exposed to situations where others are experiencing trauma or suffering will become depressed or withdrawn because they identify so much with the pain and suffering of those less fortunate.

by Christina Baglivi-Tinglof



# CUT THE CHAOS & Adopt a Color Coding System

No doubt about it—newborn twins, triplets, and quads are adorable (especially when they sleep, right?) But they also demand an enormous amount of your attention and if you don't have a plan in place you'll quickly sink beneath the mounting piles of dirty burp cloths, half-drunk baby bottles, and laundry. So while you're designing your nursery or buying your twin layette, you should also be thinking about organization. Adopting a simple plan for your family and household can help keep your head above water during those first few hectic months. But where should you begin? Think color coding.

## WHY COLOR CODE?

When you assign each of your multiples an arbitrary color and then match their personal items to that color—everything from pacifiers and blankets to sippy cups and teddy bears—it clears up the confusion of whose stuff belongs to whom. Furthermore, when

you have two or more babies at once, color coding is not only practical but a necessity as each may have different dietary or medical needs.

"We needed to color code my fraternal twins when they were babies because Matthew was sensitive to all formula except one while his co-twin, Luke, could drink anything," Susan Thomas explains. This Riverside, California mom decided to color code baby bottles—blue for Luke and green for Matthew—to help eliminate mistakes. Although her twins are now four years old, the process still makes sense. "It's helpful with shoes since my boys wear different sizes," Thomas says. "Even though they hardly look like siblings, the color coding continues to help us."

Jamie Dudzinski of Green Bay, Wisconsin relates. "I have never had an issue telling my children apart," says the mom to 15-month-old identical twin boys. Unfortunately, others did, and shortly after

putting her sons in daycare at 14-weeks old, a childcare provider gave a dose of antibiotic to the wrong co-twin. "Since then I color code everything," Dudzinski says.

Linda Curry has color coding down pat, too. This Phoenix, Arizona mom to ten-year-old, boy-girl twins, Sara and Jonathan, says there's also a great sanitary aspect to color coding personal items such as water bottles and toothbrushes. When everyone sticks to his or her own items, there's a minimal amount of cross contamination. "We've had very little illness in our family and I think it's at least in part to our system," she says. Furthermore, she believes the process of "that's yours and this is mine" adds to a twin's sense of individuality. "I do believe color coding helps to focus on the simple fact that they are two different children," Curry adds. "Although twins, they should have certain things that are theirs, and theirs alone."

"In the beginning color coding was necessary for us and others," Stacey McDonald of Anniston, Alabama and mom to 17-month-old fraternal twin boys explains. "Now it is just a routine and has stayed that way!"

## IF IT'S GREEN IT MUST BE YOU!

Dressing twins in different color clothing is the most common way of implementing the system. And for parents of identical twins or fraternal twins that look remarkably alike at birth, color coding has an added benefit. It helps parents, relatives, and especially teachers distinguish between the pair.

"We color coded religiously for the first year or so," says Ashley Domingo of Vancouver, Washington. Although she and her husband Anthony can tell their very similar-looking fraternal twin daughters, Bliss and Felicity, apart, few others can. "Color coding their clothing makes it easier for other people to recognize them, especially around family that doesn't see them very often."

Heather Eckstein learned that lesson the hard way. "We didn't color code our first set of twins and I'm ashamed to admit

that I can't tell them apart in some of our old photos," says the Tacoma, Washington blogger ([itstwinsanity.com](http://itstwinsanity.com)) and mother to six children including two sets of identical twins. "With our second set of twins, we assigned them different colors and it has been so much easier for others to tell them apart!" The bonus? Eckstein can now easily identify who is who in photographs.

But which color should you choose for your multiples? Surprisingly, it's not as simple as you would think as every family has a unique method for deciding. The Napier family of Maple Grove, Minnesota, chose green for identical twin Liam since his name is Irish and blue for cotwin Alec since his name is Scottish. (The Scottish flag is blue and white.) The Perez's of Fort Lauderdale, Florida, on the other hand, simply stuck with purple and pink, the colors of the newborn hospital hats, for their fraternal twin daughters, Rebecca and Julie. Other families try rhyming names and colors. Drew's in blue. Ted's in red. Eileen's in green. (You get the idea.)

Yet color coding clothing as a way of identifying similar twins may not be for everyone. Florence Athens of Atlanta, Georgia gave her sons, Easton and Kael, different colored braided bracelets instead. It was subtle but effective method to help others distinguish between her identical twins.

## COLOR CODE THE SCHOOL-AGE YEARS

The color coding system is flexible and can evolve as your family grows and changes. After I gave birth to a singleton two and a half years after my twins, I simply added a new color to my arsenal. With my twins now in their sophomore year of high school and my singleton in middle school, I rely on color coding more than ever. When I see a backpack thrown onto the living room floor, I know instantly who it belongs to. (And who to yell at!) I use each child's chosen color on the family calendar, too. With just a glance I can tell who has a doctor's appointment, tennis lesson, or class trip.

When it comes to laundry, color coding has been a true lifesaver. We use color-

coded laundry baskets (perfect for dropping all that color-coded clothing) as well as the "dot system." What's that, you ask? With a permanent marker, I add one "dot" to the inside label of the largest boy's clothing, two "dots" to the next largest boy, and then three "dots" to my smallest son. It's especially helpful in sorting laundry since as they've gotten older they've added more colors to their clothing palate. Furthermore, I can easily hand down clothing to the next boy in line by simply adding a "dot" to the label.

## OUT OF THE MOUTH OF BABES

Although color coding clothing is a wonderful tool for running a well-organized household, many twins become very attached to their respective colors. Some even a bit too possessive refusing to use an item in other colors, leading many parents to believe they've had undue influence on their children's preferences. Just ask Lora Morrison of Columbus, Ohio. "From the beginning starting in the hospital, I dressed Savannah in pink and Olivia in purple," she says of her four-year-old identical twin girls. "Now those are their favorite colors and I kind of feel bad since this was probably my influence!"

But there are plenty of twins who just grow sick and tired of their color. "One day when he was about five years old, Ben told me he was sick of wearing blue," explains Leslie Lewis of Arlington, Texas. When this mom to identical twin boys including co-twin John asked him what he'd like to do, his answer was simple. "He asked, 'Why can't I just tell people who I am?'"

Why indeed Ben! ❤️

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*Christina Baglivi Tinglof lives in Southern California and is the mother of three sons, including 18-year-old fraternal twin boys and a 16-year-old singleton. She's also the author of *Parenting School-Age Twins and Multiples*, and *Double Duty 2e*. She blogs at [christinabaglivitnglof.com](http://christinabaglivitnglof.com) and runs the website [talk-about-twins.com](http://talk-about-twins.com).*

# Potty Training NIGHTMARE

by Natasha Yates

When my daughter was two she came home from child care and announced, "I want to wear big girl panties like Julia." I thought, "I just gave birth to micro-preemies, who were both in the NICU. I don't have the energy to sink into potty training." Okay, I admit that was not the best parenting attitude, but I was tired. Our sons had Twin to Twin Transfusion Syndrome in-utero and were born at 29 weeks via emergency C-section. I would take Jessica to day care on my way to spend the day at the hospital with my boys. My husband would go to work and pick her up on his way home. We would eat dinner together, then he would go to the hospital and I would play and read to Jessica before her bedtime. I was pumping milk, my husband and I were very worried about the boys while trying to raise our two year old daughter, and I was tired.

I explained the deal to Jessica, "You can wear underwear but you have to go to the toilet before you wet yourself." Admittedly I really hoped the day care would do the bulk of "potty training" and she would wear pull-ups at home. I wasn't sure how to do this.

She said, "Mom, I want to wear panties all the time, at night too."

"Oh my word, what a mess this will be," I thought. I responded, "Okay, but first you have to go eight days in a row waking up with a dry pull-up."

We went shopping for underwear – an exciting event for my little girl.

Boom – day two she had an accident and she was mortified. I explained, "This is normal, it is okay, it takes time."

"Julia doesn't have accidents!!" She exclaimed.

The next eight days went by and the following morning Jessica woke me up by poking my arm and when my eyes opened, she was naked, holding up a dry pull-up and said, "Eight nights with a dry pull-up, I get to wear underwear tonight." So, peer pressure can be a good thing. This potty training turned out to be easy.

They say that it is easier to toilet train girls than boys, easier to train singletons than multiples, and preemies have a harder time of it than term babies. I don't know if that is true, but I had two, male, preemies that breezed through the twos with no interest in the toilet other than to see if toys would flush. I tried the little toilet chair in the bathroom, that didn't work. I tried the toilet seat cover to fit their little bottoms, that didn't last. I tried stickers, that didn't last long either. I let them choose underwear at the store. I pointed out their friends that wore underwear. They turned three, still not regularly using the toilet.

I asked advice of a child psychologist who suggested, "Get rid of the Pull-Ups they are made too well. They need to feel the discomfort of wetting themselves to be motivated to use the toilet." That made sense. So, underwear it was. The house is carpeted, oh what a mess. The psychologist was right in that they did not like being

wet; however, instead of using the toilet they would pee and then take off the dirty clothes and put fresh ones on leaving the dirty pants where they landed. They turned four.

One day at Target both boys were in the cart as I picked up items and placed them in the cart. As I placed a box of Pull-Ups underneath the cart Justin asked, "Can we get a toy?"

I said, "No, toys are not on our list."

Justin, "Tristan's mom gets him a toy when they go to Target."

Oh, he just pushed a button.

My exasperated response, "Tristan's mom is not spending 100s of dollars a year on Pull-Ups. Tristan wears underwear!"

David looked at his brother (he wasn't much of a talker). Justin scrunched his forehead and said, "You mean if we wear underwear we would have money to get a toy?"

"If you wore underwear we could afford to go on vacation!" I exclaimed.

Justin thought a minute as David looked back and forth from him to me. Justin said, "I would wear underwear for a toy." David's eyebrows went up in surprise.

I had a moment of hopefulness, "Uh, sure. But that means underwear all the time, all day, through the night, every night."

Justin's eyes and mouth opened with excitement. "David, if we wear underwear we can get a toy!"

David said, "I want a donut."

Justin quickly responded, "A donut? A toy is better than a donut!"

David glared at his brother, "I want a donut."

I exclaimed, "Boys, boys, if you wear underwear all the time, I'll get you a toy and a donut. Are you willing to switch to underwear?"

Justin and David looked at each other, then me. Justin said, "Yes."

David said, "I need to go to the bathroom, RIGHT NOW!"

I think I might have started running in Target. ❤️



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BETTER

than

equal



*by Eileen M. Pearlman Ph.D.*

What would you do if faced with the following scenario? You've offered your twins a reward, a trip to the nearest pet store to look at the new puppies, for doing a particular task. One twin finished the task and the other did not. You begin to follow through on giving your reward when your child who did not do his job asks, "Why can't I go look at puppies, too?"

Would you give the hard-working twin a treat for completing the task? Would you leave his brother home to do without?

Reinforcing children for the work they have completed in



a careful and timely fashion is very important. Work that the child is capable of performing, but chooses to leave undone, does not deserve a reward. Both these premises seem self-evident. But there is more to this situation than appears. For in this seemingly simple scenario lies a fertile opportunity for *building* a unique sense of self, *teaching* responsibility, and *preparing* your twins for the reality of the real world.

## BUILDING A UNIQUE SENSE OF SELF

All parents want their children to have good self-concepts and high self-esteem. But what do we mean by these words? Self-concept is how each individual sees herself in the world. Optimally, this means seeing oneself as a separate, unique individual who can relate to one's self, as well as one's family, friends, employers, etc. successfully.

So how can we, as parents, help each of our twins develop a good self-concept of themselves? Seeing and treating each twin as a separate, unique individual with her own wants, needs, personality, strengths and weaknesses, is one way. That means not seeing and treating her and her co-twin as a unit.

Many times, parents of twins believe that they should always treat their children equally. Whatever they give to one twin, they believe that they should give to his co-twin. But this does not build a sense of uniqueness and specialness. Adele Faber and Elaine Mazlish, in their book *"Siblings without Rivalry"* stated, "To be loved equally is somehow to be loved less. To be loved uniquely—for

one's own special self—is to be loved as much as we need to be loved."

This unique love, then, is what enables children to build a sense of self. This is not to say that it is never appropriate for parents to give equally to both twins; but in so doing, it is important to see each twin as unique.

Rewarding each twin individually and uniquely for accomplishments also builds self-esteem. Parents must be careful, for it can have an opposite effect if done in an unkind or unfavorable way. So the manner in which the reward is given is very important. Avoid making comparisons, favorable or unfavorable, between a twin and her co-twin. Instead, Faber and Mazlish explain, "The key is to describe what you like. Or describe what needs to be done. The important thing is to stick with the issue of this one child's behavior." There is no need to refer to the co-twin. Whatever you want to say can be said directly.

Feelings may be stirred up when one twin is acknowledged or given a reward and the other is not. Feelings such as envy, jealousy and competition are natural and sometimes unavoidable. These feelings, once acknowledged, can provide an opportunity for communication and growth for the twin, her brother or sister and her family. Parents who listen, are understanding, and accept their child with all her feelings, help their child accept herself, therefore, building self-esteem. It is important to note that some competition, once understood and appropriately directed, can lead to growth and development. This can spur a person on to stretch to great heights and achievements, breeding self-confidence and self-esteem.

## TEACHING RESPONSIBILITY

Everyday experiences are wonderful teaching moments and the example given at the beginning of the article is one that provides an opportunity to learn responsibility. Making a choice, finishing a task, and learning consequences of one's choices, teach independence and responsibility. Being rewarded for a job not finished, just because one's twin sibling gets rewarded,

does not teach responsibility; it teaches dependence on one's co-twin.

Making good decisions, following through on these decisions and taking responsibility doesn't just happen automatically; it is a long process which is learned. How do we teach our children discover there are choices, make decisions regarding those choices, and face the consequences of their decisions, they have the opportunity to learn responsibility. The more choices and consequences they face, the more responsible they become. This means letting children learn from their experiences, and *not* bailing them out when they make poor decisions.

Foster Cline and Jim Fay, in their book *"Parenting With Love and Logic,"* discuss two kinds of parents who do not foster responsibility in their children. One type they call the "helicopter parents"; the other, they call the "drill sergeant parents." Helicopter parents feel uncomfortable seeing their children hurting or struggling. So they bail their children out. Drill sergeant parents never allow their children to think for themselves, choosing to make all the decisions for them. According to Cline and Fay, both these styles of parenting tell children that, "You can't think for yourself, so I'll do it for you."

The more often children are bailed out—by their parents, by their co-twins, by the twin situation—the less they will learn to take responsibility for themselves and grow into separate, responsible individuals. Cline and Fay believe that, by not allowing our children to fail, "sometimes grandiosely fail, we cannot allow our children to choose success." Parents who allow their children to try things on their own, make choices and see the consequences of their choices, teach responsibility. This begins in the early years with choices that are not too risky and continues throughout their lives. This is a learning process; making mistakes, or failing, is a part of learning and, therefore, growing.

The emotional climate or environment in which responsibility is experienced and taught is important. Parents who are caring, loving and understanding of their

children's efforts at learning will promote future growth. These children will feel secure in their relationship with their families and eventually willing to take further risks in assuming responsibility for their actions. Parents can help their children with decisions by teaching their children to think—asking questions and offering choices. Again, this is done in a climate in which the child is accepted unconditionally and is not judged for trying to work out her problems or take responsibility for his actions.

## PREPARING FOR REALITY

Eventually, our twins grow up and go out into the "real world"—a world where they are responsible for their own decisions and actions. Each may not be looked upon as being "special" because he or she is a twin. They probably will not be rewarded because their twin sibling was rewarded and their boss wants to keep things even and equal.

Giving our twins equal rewards, according to Judy Hagedorn and Janet Kizziar, in *Gemini: The Psychology of Twins*, "does not help prepare the youngsters for reality—that throughout life what they receive and what they achieve will not be identical."

It can be a rude awakening for twins when they get older and discover for the first time that they are responsible for themselves. Therefore, allowing our twins to face the consequences at an early age prepares them for the reality of the adult world.

Let's go back to the beginning scenario. It may be easier to take both twins to the pet store. You would not see the dejected face on the child left behind, nor hear the arguments, nor, perhaps, even see her crying. But your twins would be missing an opportunity for learning and growing. Day-to-day experiences provide a rich soil in which to plant seeds for growth and development. Don't let spring planting pass you by. ♥

***Eileen M. Pearlman, Ph.D., resides in Santa Monica, California, is a psychotherapist and director of TWINSight. She is an identical twin, is married to a fraternal twin and has two daughters.***

# MEET

by Mary Oves

So I'm shopping with my thirteen year old twin sons, trying to find outerwear that they will actually agree to wear outside.

I hold up a black hoodie, and show it to Dustin. "How about this one? You can wear it over your sweatshirts." He made a face that has accompanied him since he became a teenager. It is a cross between a grimace and a scowl, kind of like his arm is being twisted behind his back.

"Ew, no. Who am I, Johnny Cash?" "Fine," I said, gesturing to his twin brother. "How about you, John? Do you like it?"

He sauntered over, and eyed the hoodie up and down. "Did Dustin like it?"

"No." He smiled. "Then I like it. It's awesome."

My twin sons have been competing ever since they were born. Who could scream the loudest, make the messiest diaper, get lost the fastest. When they were babies, people would "ooh" and "ah" over them in their double stroller. "How do you tell them apart?" they would ask. I would smile at them cooing in their stroller, dressed identically, and wonder how anyone could ever think they look alike.

For thirteen years it has been a battle of who has what, or more, or better. "Mom, why does he have a shirt with a blue digger, but mine is brown? I waaaaaant bluuuuuuueeeeee..."

"Mom, John has twelve green beans, I only have eleven!"

"Mom, Dustin's sippy cup has yellow stripes, why doesn't mine have yellow stripes?"

Everything had to be the same color, the same shape, the same amount...





# TING in the MIDDLE

same, same, and same. I either bought two, or zero, because it wasn't worth the fight. I still remember one Christmas my husband bought one a football, and one a baseball glove. The cacophony that resulted could have been heard straight to the next county.

"Why can't I play football? I like football?" (grasps at football...) "Where's my glove? I need a glove!" (grasps at glove...) Trading never helped. It still left both children without something the other had.

Then they grew and their bodies changed, as well as their minds. They grew tired of being referred to as the "twins" and sought to establish their own identities. Seemingly overnight, not only did the amount of green beans not matter, green beans became distasteful if the other liked them. "Can I have corn instead, Mom?" Now that the boys are thirteen, the goal is to be as different as possible.

When people look at them, the reply is more invariably, "Twins? Where? These two?" They look back and forth at the boys, trying to figure out how these two human beings could possibly be related. One is lean, the other muscular. One has dark hair, the other blonde. One likes people and going to parties, the other appreciates quiet and alone time. One is competitive and motivated, the other relaxed and thoughtful. One wants eggs and toast, the other pancakes and syrup. One likes steak, the other pasta. The differences between them go on and on.

If Dustin is good at soccer, John aspires to football. If John is good at a video game, Dustin pronounces the game "stupid and senseless." They refuse to have the same friends, the same interests, the same grades. If John is a good writer, Dustin excels in math and if Dustin likes his gym teacher, John most certainly has a "problem" with him.

John is very sociable, and constantly seeks social situations. Dustin would stay home and empty the dishwasher before he would ever admit that John was going somewhere fun. When John gets home, and tells Dustin that all of his friends were there asking for him, he shrugs his shoulders in indifference. "Sounds like it was dumb," he mutters, but I can tell from the look in his eyes that he wishes he had gone.

They constantly vie for the upper hand. Both boys are surfers, and one day as we headed to the beach, we had to make a decision to surf either to the left or to the right. Dustin ascertained right was better, John was sure the left was the right choice. They argued vehemently over this, so an executive decision needed to be made: I chose the left because it was closer and looked less crowded.

Dustin grumbled and carried on, and decided to surf by himself on the right. After a half hour,

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both boys came out of the water at exactly the same time, and announced that the other was right, the side his brother picked was better. They met in the middle again, and proceeded to get in another argument, and then switched sides, scowling and muttering all the way.

But despite all the bickering, it is thrilling to watch.

Because the things that divide them are what make them interesting people. They are going to follow their own personal dreams. They will play different sports, go to different colleges, and aspire to different careers. But at the end of the day, just like on the beach, they will meet in the middle, as brothers, disagreeing with one another...but still brothers (and best friends.) ♥



# DOES **Alcoholism** Run in Families?

WHAT TWIN RESEARCH REVEALS

*by Nancy L. Segal*

## Are girls more likely than boys to abuse alcohol? These questions are of particular interest to those of us who are raising twins, as we support the individual similarities and differences between our identical and fraternal twins.

Since greater similarity between identical twins than fraternal twins demonstrates a genetic effect on a given medical condition or behavior, twin studies can help researchers disentangle the interplay of genetic and environmental influences associated with alcoholism. A number of researchers, in fact, both in the United States and abroad, have used twin studies to investigate hereditary influences on alcoholism, and have published some significant results.

### TWIN STUDIES

A number of twin studies over the years have demonstrated gender and genetic influences on alcohol consumption and alcoholism. In fact, their results have helped rule out its simply being social contact that impacts these behaviors. Carol Prescott, Ph.D., in the Department of Psychiatry at the Medical College of Virginia in Richmond, studies alcohol use in an older twin sample. Twin participants included members of the American Association of Retired Persons (AARP). Questionnaires were mailed to over 12,000 twins who had responded to a notice in the organization's newsletter. Over 9,000 forms were returned. Some twins were eliminated for a variety of reasons—for example, if the co-twin was deceased or if there was a request for removal from the mailing list.

The final sample included over 4,000 twins, with a mean age of 66.7 years. It was found that alcohol consumption was greater among males than females, as well as among older than younger individuals. In addition, twins who were in more frequent social contact with one another were more similar for both lifetime and current alcohol

use. Whether similarity reflects a genetic influence in this case, or whether the fact that the twins chose to spend a greater amount of time together, is unclear.

Ordinary drinking behavior was also studied in a Colorado sample that included 46 identical twin pairs, 44 fraternal twin pairs, 37 non-twin sibling pairs and 46 adoptive sibling pairs. Research participants were recruited by means of newspaper and radio ads in the Denver area. A questionnaire was developed to assess alcohol consumption during the previous 12-month period.

Identical twins showed greater resemblance than fraternal twins, suggesting a genetic influence. Fraternal twins, non-twin siblings and adoptive siblings showed relatively low resemblance. These findings indicate that shared environment for identical twins have special characteristics which may contribute to behavioral resemblance between them. The investigators noted, however, that this socially-based explanation was probably unable to fully explain the identical twin findings.

### RESEARCH FINDINGS

The importance of genetic factors in alcoholism among women has been unclear for some time. In a recent review, Matt McGue, Ph.D., from the University of Minnesota, indicated that three out of five twin studies which included females did not produce evidence of a genetic influence on alcoholism.

In contrast, a recent study by Kenneth S. Kendler, M.D., and colleagues in the Department of Psychiatry at the Medical College of Virginia, did find evidence of genetic effects for alcoholism in women. These investigators reported findings from a population-based study using female twins. Over 1,000 twins were identified in the Virginia Twin Registry.

Registry staff located twins following a review of birth certificates of individuals born in the state of Virginia since 1918. Twins were interviewed by trained social workers who were unaware of their drinking status. Based on interview information, twins were classified into one of three groups: narrow-alcoholism with tolerance or dependence;

## What is Fetal Alcohol Syndrome?

Fetal alcohol syndrome, or FAS, may result when alcohol ingested by a pregnant woman crosses the placental barrier between her and her fetuses before birth. Study of the syndrome during the last 20 years has indicated that children with FAS exhibit both characteristic physical and behavioral effects. Behavioral effects, says Laura Beck, Ph.D., author of the textbook *Child Development* and a professor at Illinois State University, include mental retardation, heightened activity level, and limited attention span. Physical effects include slowed development, eyes that are widely spaced, and small head size. Children displaying only a few symptoms of prenatal exposure to alcohol show fetal alcohol effects, or FES. Children diagnosed with FES typically had mothers who ingested smaller quantities of alcohol during pregnancy than children with FAS.

FAS was a major focus of the Gatlinburg Conference on Research and Theory in Mental Retardation and Learning Disabilities held in Brainerd, Minnesota. Among the various findings reported at the meeting was information of particular relevance to parents of twins. Studies by French investigators included mothers of fraternal twins who had consumed large quantities of alcohol during their pregnancies. Dr. Ann Streissguth, one of the first researchers to define FAS, described cases in which one member of a fraternal twin pair was affected with FAS, while the twin partner was unaffected. This finding suggests that there may be a genetically-influenced predisposition to being susceptible to the effects of prenatal alcohol exposure.

intermediate-alcoholism with or without tolerance-dependence; broad-alcoholism with or without tolerance-dependence or problem drinking.

The lifetime prevalence for all three categories of alcoholism was higher for identical than fraternal twins, suggesting genetic effects. In addition, genetic factors seemed to contribute equally to all three varieties of alcoholic behavior. It was noted that these findings appeared to be inconsistent with those from some previous studies which have not supported a role for genetic factors underlying alcoholism among females (the majority of studies have, however, found evidence of genetic factors for alcoholism in males.)

Kendler and his colleagues estimated that genetic differences account for approximately 50 to 60 percent of the individual differences we see among females for alcoholism. These are important findings that can help families and medical health professionals to understand and to treat this disturbing condition. It is important to note, however, that differences between previous studies and this one may be associated with the particular definitions of alcoholism used and/or the methods which participating twins were identified.

As in earlier studies, identical twins in the present sample reported greater similarities in their childhood environments, and greater frequency of social contact as adults, than did fraternal twins. In this study, similarity in childhood environments was found to be unrelated to twin resemblance in the measured drinking behaviors. Frequency of adult contact was, however, associated with alcoholism.

The investigators indicated that their data did not enable analysis of whether social contact led to similar drinking preferences, or whether similar drinking preferences led to increased social contact. They did point out that studies of other behavioral variables have not provided evidence that contact leads to similarity, so that it is unlikely that such processes would be operative in the case of alcoholism.

## NEWS YOU CAN USE

In general, twin studies of alcoholism support a genetic influence on alcoholism, thereby answering the question posed earlier as to whether alcoholism “runs in families.” In addition, as noted in research reports stated earlier in the article, Kendler’s more recent twin study now reports a genetic influence on alcoholism in females.

Genetic influences do not imply certain outcomes, however. For example, though having an alcoholic identical twin means that the twin partner’s chances of becoming alcoholic are relatively higher than for members of the general population; it does not mean that unaffected twin partners of alcoholic twins necessarily face the certain outcome of becoming alcoholics themselves. Environmental factors also contribute to the behavior; someone with a predisposition to alcoholism will not become alcoholic if alcohol consumption is severely restricted or avoided entirely.

An important goal for the future is to clarify the nature of the genetic influence on alcohol use and alcoholic behavior. McGue emphasized that there are probably several biological pathways leading to alcoholism. Inherited factors may include alcohol sensitivity, personality and temperament characteristics, and cognitive factors, which assert their effects either alone or in combination. How these factors interact with critical aspects of numerous researchers in the future. Identical and fraternal twins will be a major part of this important undertaking. ♥

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**Nancy L. Segal, Ph.D.**, is an associate professor in the department of psychology and Director of the Twin Studies at California State University, Fullerton. She is also author of the new book that just came out called, “Someone Else’s Twin...the True Story of Babies Switched at Birth”

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## Twins’ Roles in Alcohol Research

- A number of researchers both in the United States and abroad, have used twin studies to investigate hereditary influences on alcoholism
- Twin studies over the years have demonstrated genetic influences on alcohol consumption and alcoholism.
- One twin study of 9,000 people found that alcohol consumption was greater among males than females, as well as among older than younger individuals.
- Identical twins show greater resemblance in drinking behavior than fraternal twins, suggestion a genetic influence.
- A later study in the mid 1990s at the Department of Psychiatry at the Medical College of Virginia found evidence of genetic effects for alcoholism in women.
- In a study conducted by the Virginia Twin Registry, twins were classified into one of three groups: narrow-alcoholism with tolerance or dependence; intermediate-alcoholism with our without tolerance-dependence; broad-alcoholism with our without tolerance-dependence or problem drinking.
- Genetic factors seemed to contribute equally to all three varieties of alcoholic behavior listed above.
- Cases in which one fraternal twin is affected with fetal alcohol syndrome and the other is not, suggest that there may be genetically influenced predisposition to being susceptible to the effects of prenatal alcohol exposure.



# TRY THESE TWINS SHOP EXCLUSIVES....

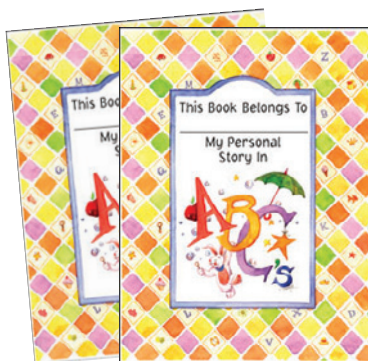
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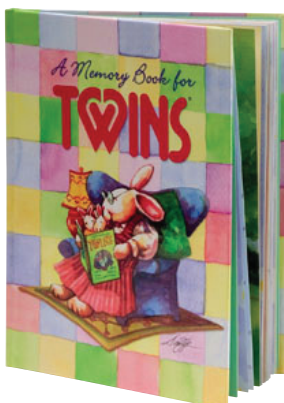
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Boy/Girl Twin Story Packet—Hello Twins, Two Times the Fun, Twenty Wiggly Toes, The Twins and the Birthday Party, His Sister, Her Brother, The Chairs Where Pam and Sam Sit. \$43.95

Boy / Girl Twin Story Packet

*by Jacqueline Davidson Kopito*

# THE ROLLERCOASTER



One sunny Saturday morning, my parents surprised us by taking us to Six Flags Great Adventure. Me and my twinnie, Amy, were very excited. I couldn't wait to munch on cotton candy and go on the water slide and the Ferris wheel. Amy couldn't stop talking about "Rolling Thunder" the huge rollercoaster. This is all she talked about all morning until we arrived at the park.

Even though Amy and I are twins and like a lot of the same things, there are plenty of things that we don't share a love for; rollercoasters are one of them. I had never been on a rollercoaster, but I knew it wasn't for me, especially this Rolling Thunder which was made out of wood. I didn't want to say anything to ruin Amy's fun. After all, she'd never been on a rollercoaster either, but she thought the ride looked like so much fun. After getting some cotton candy, sliding down the water slide and going on the Ferris wheel, it was time for the rollercoaster. YIKES!! I wasn't sure how I was going to break the news to her.

As we approached the ride, I hoped I wouldn't make the height requirement, but no such luck; I made it with a few inches

to spare. I didn't know what to do? I kept on looking at all the people on the ride and they were all screaming their heads off. This made me even more scared! I finally decided to fess up and tell Amy the truth; I was too scared to go on the rollercoaster. I was surprised by Amy's response, "Why are you being a baby?! Don't be a chicken head!" Why wasn't she more understanding? Usually my twinnie was. Well, I wasn't going to let her name calling bother me. I stuck to my guns and told her I wasn't going and that she should go with Dad. Again, Amy looked at me with disbelief and told me I was being a chicken head!

As we inched towards the front of the line, I saw all the people coming off, laughing and smiling. Some of the kids were even getting right back on line to go again. Hmm... was I overreacting a bit? I began thinking; maybe it's not so scary. Maybe Amy was right, I was just being a chicken head for no reason.

We were up next when Amy had a change of heart and said to me, "Jackie, you are not a baby if you don't go on the rollercoaster, but I think it will be really fun and I will hold your hand



the entire time." As usual Amy was being the best twinny ever. She always knows the right thing to say to make me feel better. Now I wasn't so scared. Maybe I could do this. I smiled at Amy and we both started laughing. Then Amy added, "Sorry for calling you a chicken head". OK, it was then settled, I was going to take the plunge and go on the rollercoaster.

With my hands sweating and my heart beating a mile a minute, I got on and a few seconds later the teenager put the bar down and locked it. Now there was no turning back. Amy was squeezing my hand through the bar and away we went...Woo wee!!!

What I thought was going to feel like eternity only felt like a half of a second. I had a blast on the rollercoaster! After getting off, Amy turned to me and told me she had the best time. I agreed with her. It was great! She then said, "Let's do it again!" Without hesitating, I said, "definitely!" as we both got back on line. ♥

Continued from page 5

## TWINS IN THE NEWS

"They definitely have different personalities, and once you get to know them you can see the differences to tell them apart."

The twins, both sets of them, have given the entire cross-country team a difficult but fun task in trying to figure out who is who. Opposing runners probably think they're hallucinating when all the twins pass them on the course, something they usually do.

Rachel Rairdon finished third in Class 2A at state last year with Rebekah ninth. The Wagners already are showing their talent and are capable of running with the Rairdons on a team ranked first in the state in 2A.

"What's been cool to see is sometimes a Rairdon will pair with a Wagner and the other Rairdon will go with the other Wagner," Packard said. "They are close enough in talent that they can mix it up."

The similarities between the sets of twins is striking. All are tall and blond, making it easy to even mix up a Rairdon and a Wagner. Both sets are very quiet, but they still have the telepathy twins seem to share.

When asked separately about adjusting to high school life and the balance between school and cross country, the Wagners had almost identical answers. "It's a lot of hard work, but you get through it," Leeann said. "We just encourage each other and have fun." Megan's answer was "It's a lot of hard work and you have to work hard at school, but it's very cool." The Rairdons both joked about how often Packard yells for "twins" when he wants something done and no one knows which pair he's talking about. For the first time in their lives, the Rairdons are on the other side of trying to figure out who is who. "I don't think I've met other identical twins besides us. It's awesome," Rebekah said. "We kind of do everything together. It really has made us family." Rachel said she now feels some sympathy for others who can't keep them straight. "I can now tell what everyone else has to do telling them apart. They look so similar," Rachel said. Even though it's a fun quirk, the connection between the five runners could be vital with Couch fitting seamlessly into the group. Packard called Couch the "glue" to the team.

Her energetic personality has brought extra spirit into the reserved twins. All five, even without knowing it, push each other in every race and are good enough to possibly take home Heritage Christian's first girls team state title. "I think our unity could be the difference," Packard said. "I think their relationships could be the thing when it comes down to it. When they have to dig deep, I think they'll dig deep for each other." ♥



# Double Takes



1

Lily & Ella  
Age 22-mos, FR  
Golden, Colorado



2

Terynn & Kynlee  
Age 7-mos, Fr  
Liberty, MO



3

James & Luke  
Age 3, ID  
Lena, Illinois



4

Janelle Rose & Madison Grace  
Age 18-mos  
Kent, Washington



5

Jack & Emma  
Age 1, FR  
Fort Lauderdale, FL



6

Deacon & Parker  
Age 1, ID  
Anamosa, Iowa



7

Mackenzie & Mikaela  
Age 4, FR  
Carol Stream, IL



8

Brady & Isabella  
Age 1, FR  
South Boston, MA



# September/October 2014



9

Layla & Gunnar  
Age 6-mos, FR,  
Greeley, Colorado



10

Nella & Charleigh  
Age 22-mos, FR  
Montrose, MI



11

Olivia & Colin  
Age 14-mos, FR  
Sauk Rapids, Minnesota



12

Parker & Carson  
Age 6, FR  
Crystal, MN



13

Lila & Archier  
Age 6-weeks, ID  
Oklahoma City, Oklahoma



14

Luke & Logan, Age 4 1/2, FR;  
Charlie & Chris, Age 2, ID  
Mine Hill, NJ



15

Grayson & Jackson  
Age 6-mos, FR  
High Springs, Florida



16

Gabriella & Sophia  
Age 3-mos  
(in photo now 15-mos), ID  
Pearl City, HI



17

Owen & Aubrianna age 5 1/2  
(in photo now 6 1/2), FR  
Harrah, Oklahoma



18

Avery & Roman  
Age 14-months, FR  
New Castle, PA



19

Seneca & Sienna  
Age 6, FR  
Conklin, Alberta Canada

# Double Takes



20

Iris & Hesston  
Age 1, FR  
Ephrata, WA



21

Eli & Ezra  
Age 15-mos, FR  
Westford, MA



24

Lundon & Saylor  
Age 1, FR  
Woodruff, SC



22

Maverick & Cruz  
Age 8-mos, FR  
Sacramento, CA



23

Max & Nora  
Age 3, FR,  
DeWitt, Michigan



25

Allison & Emmaline  
Age 11-mos, FR  
Land O' Lakes, FL



26

Chloe & McCoy  
Age 6-mos, FR  
Willow Bunch, Saskatchewan,  
Canada



27

Matthew & Alexander  
Age 6-mos, FR  
San Diego, CA



28

Amire & Anaysia  
Age 8, FR  
Kokomo, IN



29

Jackson & Annabelle  
Age 10-mos., FR  
Atlanta, Georgia



30

Elijah & Ephraim  
Age 23-mos, ID  
Miami, FL

# September/October 2014



31

Rissie & Ruby Woodward  
Age 6, FR  
Soddy Daisy, TN



32

Shawn & Ella  
Age 2, FR  
Katy, TX



33

Nathaniel & Mark  
Age 10-mos, ID  
Westminster, Maryland



34

Ellie & Pepper  
Age 16-mos, FR  
West Hartford, CT



35

James & Caroline  
Age 2, FR  
Woodside, NY



36

Tyson & Roman  
Age 1, ID  
Hampton, Virginia



37

Lily & Sophie  
Age 2-weeks in photo, unknown  
Frederick, CO



38

Beckley & Kaitlin  
Age 2 in photo (now age 4), FR  
San Diego, CA



39

Gabriel & Gregory  
Age 7-mos, FR  
Fiskdale, MA



40

Lucianne & Vivianne  
Age 4, FR  
Windsor Colorado

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